

April 3 Visit to Middlemore

Dear Sarah Tout,

Thank you for the opportunity to visit your department.

It was a pleasure to meet the SMOs Registrars and Administrative staff. The discussion of current training and rostering challenges was very helpful in achieving an overview of the current progress towards Accreditation in 2020.

I believe there are no major obstacles to achieving this; and I congratulate all on the efforts made and innovations instigated.

I would suggest a re-accreditation visit in March 2020, when the new senior and junior doctor appointments will have had sufficient time to become established in their positions. This will also allow sufficient time to consolidate changes currently planned.

I believe the Accreditation standards will be met within this timeline.

My impression is that the culture of the unit is excellent, and in particular it is one open to change and reflective thinking. Training is a priority, and junior staff report a very positive supportive and enabling culture. They report all senior staff are approachable.

I understand [REDACTED] is a newly appointed change manager, who will fully evaluate potential roster changes, and help optimize working arrangements to best facilitate training amongst other priorities.

Today's conversations have resulted in the following suggestions

Education

Registrar Education Sessions might be aligned to the RANZCOG curriculum, and a year or two-year program of topics be arranged in advance. This can help to optimize examination preparations. A nominated SMO might join the session for all or part of the time each week. This is desirable to enable experienced input to topics. Relevant Practice SAQ/ OSCE questions could be discussed at the end of the session.

An accessible lap box trainer could be made available within the reg room/ unit, but not locked away after hours. It is also desirable that all trainees have their own lap box trainer.

Attendance at the MDMs surgical complication and audit meetings is useful learning for trainees.

The Fellows now carry pagers for an hour, to enable reg attendance at the hour-long dedicated registrar teaching sessions on Wed morning.

Surgical Training

Yr 4 upwards report good access to surgical cases, including additional lists picked up whenever available. Future outsourcing may also extend surgical opportunities.

Yr 1 & 2 trainees can access acute surgeries, but mainly concentrate on acquiring the necessary OB and GYN acute skills.

There are imposed limitations to surgical access due to Anesthetic shortages, and Anesthetic working systems. The full surgical time should be utilized by the team, as anesthetists are aware of the lists planned. This system should minimize case cancellations on the day.

The recently introduced Surgical Buddies allows regular exposure to nominated SMO's lists and cases/ complications can be discussed in this forum

Whilst pre-admission visits are under SHO care, the opportunity to access case details through an electronic portal exists when the roster is available ahead of time.

The surgical buddy system enables a loose team structure for gynaecology. The trainees are able to discuss pre and post op matters with the appropriate SMO. Such loose team structure may be more and difficult, and potentially associated with more downsides in obstetrics. OB given the significant acuity and high workload of the service, which requires on-site SMOs, and a shorter working week.

Post-acute call acute patient results are discussed with the SMO of the day as necessary. This is a pragmatic solution, and ensures discussion is possible with an on-site SMO in person.

Roster

An effort is being made since templates were finalized in March. There is a persistent issue with errors in this template, which means last minute changes occur. This should be remedied, as there is a loss in confidence when these oversights mean last minute changes to the roster are frequently required.

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sign offs for Colposcopy and USS have always been completed in a timely fashion to date, and the new week long block for Colposcopy clinics and Ultrasound training off-site is very advantageous to training.

Feedback re: Trainee progress is through Training Supervisors, and credentialing is completed at the 3-monthly Assessment times. Some registrars do not know about the credentialing outcomes.

Comment re: the inability to provide a senior buddy when on-call last year because of the more junior mix will resolve over this year. Of necessity the on-call SMOs have been available on the floor in-lieu in this capacity.

Ongoing opportunities for trainees to debrief re their working experiences may be a further welcome addition with the surgical buddy systems

Additional TS will be available at the end of the year to optimize trainee to TS ratios.

A Cultural Competence course will be accessed for trainees requiring this over 2019.

Congratulations on all progress made and your future plans.

Kind Regards,

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